

| TO: (Name, office symbol, room number, building, Agency/Post) | | Initials | Date |
|--|-------------|----------|--------|
| 1. | Col CHAS | X | 21 Nov |
| 2. | Col Wells | KW | 24 Nov |
| 3. | MG THOMPSON | | |
| 4. | | | |
| 5. | | | |

| Action | File | Note and Return |
|--------------|--|------------------|
| Approval | For Clearance | Per Conversation |
| As Requested | For Correction | Prepare Reply |
| Circulate | <input checked="" type="checkbox"/> For Your Information | See Me |
| Comment | Investigate | Signature |
| Coordination | Justify | |

REMARKS

GRILL FLAME (U)
CLOSE HOLD/HAND CARRY

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

| | |
|--|----------------|
| FROM: (Name, org. symbol, Agency/Post) | Room No.—Bldg. |
| Maj Stone | |
| | Phone No. |
| | 5-5848 |